

**Access this form via website at: [www.hawaii.gov/dcca/areas/pvl](http://www.hawaii.gov/dcca/areas/pvl)**

- 1) Type or print legibly in dark ink and sign application.
- 2) **Attach** the non-refundable application fee of **\$25.00** made payable to: **COMMERCE AND CONSUMER AFFAIRS**. (Note: A \$15.00 service fee will be charged for checks which are not honored by the bank.)
- 3) **Attach** completed Experience Certificate (MB-03).
- 4) **Attach** releasing letter if employed with another company.
- 5) \$10 reissuance fee.
- 6) Mail to: *Mortgage Brokers and Solicitors*  
*DCCA, PVL Licensing Branch* or *335 Merchant St., Room 301*  
*P. O. Box 3469* *Honolulu, HI 96813*  
*Honolulu, HI 96801* *Phone: (808) 586-3000*

BOARD USE ONLY

DATE:

Name of Designated Principal Mortgage Solicitor (First, Middle)		(Last)			
Residence Address (include apt. no., city, state, zip code)		Social Security No.		License No.: MS-	
		Phone No. (days)		If no license, date applied on:	
Mailing Address (ONLY if different from residence)		Are you at least 18 years of age?..... YES NO			
		Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States?..... YES NO			

I further certify that I have read and will abide by the provisions of Chapter 454, Hawaii Revised Statutes, pertaining to Mortgage Brokers and Solicitors. I am aware that I will be responsible only for the mortgage financing operations of the specific main office or branch office to which I am assigned.

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Date \_\_\_\_\_

Signature \_\_\_\_\_

## VERIFICATION OF EMPLOYMENT BY EMPLOYER

located at \_\_\_\_\_ as the designated principal mortgage solicitor.

Hawaii Business Address (Physical Location)

Name of Mortgage Broker (as it appears on license)	License No. MB- MBB-	Phone
<p><i>Subscribed and sworn to before me this</i></p> <p>_____ day of _____, 20_____</p> <p>_____</p> <p><i>Notary Public, State of</i> _____</p> <p><i>My Commission expires</i> _____</p>		
<p>_____</p> <p>Signature of Authorized Agent for Mortgage Broker</p> <p>_____</p> <p>Print Name of Authorized Agent</p> <p>_____</p> <p>Title of Officer</p>		<p>_____</p> <p>Phone No.</p>

MB-13 1105R

Appl.....	416 .....	\$25
Service Fee.....	BCF .....	\$15

# EXPERIENCE CERTIFICATE - MORTGAGE BROKER/SOLICITOR

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## PART I. TO BE COMPLETED BY APPLICANT

**Complete Part I only, give your previous employer(s) for certification of your experience in financial transactions involving primary or subordinate mortgage financing. Employer's signature must be notarized. Attach to your application.**

Name (First, Middle)

(Last)

Type of License Applying for:

MORTGAGE BROKER  
SOLE OWNER

DESIGNATED PRINCIPAL  
MORTGAGE SOLICITOR

## PART II. VERIFICATION OF EMPLOYMENT BY PREVIOUS EMPLOYER(S)

*The above-named person is applying for a license as a mortgage broker or designated principal mortgage solicitor. Please provide the following information.*

Business Name & Address of Employer:

Name of Supervisor:

Employment Date

Termination Date

Length of Employment

Reason for Termination

Yrs.

Mos.

**DESCRIBE IN DETAIL** applicant's experience in financial transactions involving primary or subordinate mortgage financing to reflect a minimum of two years of primary or subordinate mortgage financing.

Affidavit of Employer:

I, the above-named applicant's employer, hereby certify that the information provided in the certification is true and correct.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Employer's Signature

Notary Public, State of \_\_\_\_\_  
My Commission expires \_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title